

NORTH CAROLINA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES  
**FORM #1**      STEVE TROXLER, COMMISSIONER  
 APPLICATION FOR LICENSE/CERTIFICATE (NEW)      **2014**

<b>026</b>	Type: 026 Ground Pesticide Applicator <u>TO BE ADDED</u>	12/31/2014 Expiration Date
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<p>♦ Since you have passed your pesticide exam, you are eligible to be licensed ♦</p> <p><b>Instructions:</b></p> <ul style="list-style-type: none"> <li>The information that you provide will be used to prepare your certification card.</li> <li>Provide your name, address, phone, county, &amp; social security number(Required)</li> <li>Sign on the line at the bottom of the page after reading the attestation statement. (Required)</li> <li>Provide your exam serial number(s)</li> <li>Application should be returned with a check or money order in the amount of \$75.00 made payable to NCDA&amp;CS. PLEASE DO NOT SEND CASH.</li> </ul>	<p>Please return this application with fee to:</p> <p><b>NCDA&amp;CS</b>  <b>Structural Pest Control &amp; Pesticides Division</b>  <b>Licensing Unit</b>  <b>1090 Mail Service Center</b>  <b>Raleigh, NC 27699-1090</b>  <b>Phone: (919) 733-3556</b></p>
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<b>Name:</b>					
<b>Company Name:</b>					
<b>Address:</b>					
<b>Address:</b>					
<b>City:</b>		<b>State</b>		<b>Zip Code</b>	
<b>Phone (Home):</b>		<b>Phone (Work):</b>			
<b>Email Address:</b>					
<b>County:</b>		<b>Social Security Number:</b>			
<b>Exam Serial Number(s):</b>					
<b>Exam Date(s)</b>					

**SIGNATURE REQUIRED**

**X**

APPLICANT'S SIGNATURE

No application is accepted unless signed by the applicant and accompanied by full payment.

**FEE: \$75.00**

Check or money order made payable to NCDA&CS.

**FOR OFFICIAL USE ONLY. DO NOT WRITE IN THIS BOX**

LType:

Certification Expires:

FNum:

Receipt#: